RECEIVING REPORT

IMPORTANT:

- * This form must be received in the payment office within 5 workdays of acceptance.
- * Acceptance must take place within 7 calendar days of delivery or completion of work unless a different inspection/ acceptance period is stated in the contract. Explain in block 8 if acceptance is longer than stated in the contract.
- * Invoices received must be time stamped to indicate the date of receipt.

	QF.	CTION 1 - CONT	RACT IDENTIFICATION		
1. NAME OF CONTRACTOR	- OL		RAOT IDENTIFICATION		
	ı				
2. PEGASYS DOCUMENT NUMBER		3. CONTRACT/PURC	HASE ORDER NO.		
	SECTION 2	2 - DESCRIPTION	OF GOODS AND/OR SERVICES	<u> </u>	
4A. ITEM NO. 4B. DESCRIPTION (For services, also give dates of service)					4C. QUANTITY
5. MAXIMUM PAYMENT 8. F			MARKS		<u> </u>
6. LESS DEDUCTION(S) F					
(Explain in Item 8)					
7. MAXIMUM AMOUNT APPROVED FOR PAYM	ENT				
(Item 5 less Item 6)	I	SECTION 3 -	CERTIFICATION(S)		
9. TYPE OF DELIVERY (Mark "X" in a	ppropriate box)		_		
A. FULL	B. PAF	RTIAL	C. FINAL PARTIAL		
10. CERTIFICATION I CERTIFY THAT THE ABOVE GOODS AND/OR SERVICES HAVE BEEN			11 SECOND CE	RTIFICATION (Ontio	nal)
RECEIVED ON (Date) AND ACCEPTED ON (Date)			11. SECOND CERTIFICATION (Optional) THIS IS TO CERTIFY THAT THE GOODS AND/OR SERVICES DESCRIBED HAVE BEEN ACCEPTED.		
A. NAME AND TITLE (Type, print or s	tamp)		A. NAME AND TITLE (Type, print or st	атр)	
B. CORRESPONDENCE SYMBOL C. TELEPHONE NUMBER		IUMBER	B. CORRESPONDENCE SYMBOL C. TELEPHONE NUMBER		
E. SIGNATURE	,	F. DATE SIGNED	E. SIGNATURE	F	. DATE SIGNED